AME Applic	AMENDMENT TRANSMITTAL LETTER  Application No. Filing Date Examiner				
Applic 10%	Application No. 10/675,244		Filing Date September 29, 2003		Art Unit 2816
		September	29, 2003	H. Nguyen	2010
Applicant(s).	C. Müller et al.			· · · · · · · · · · · · · · · · · · ·	
Invention: DR	IVER CIRCUIT				
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	nerewith is an ame been calculated an			• •	
The fee has i	been calculated an		S AS AMENI		
	Claims Remaining After	Highest Number Previously	Number Extra Claims		
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	pendent Claims (ch	eck if applicable	(e)	<u> </u>	
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Other fee (p	lease specify):				
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x Large E				Small Entity	
x No addi	tional fee is require	ed for this ame	ndment.		
	charge Deposit Aca ate copy of this sh			n the amount of \$ _	·
A check	in the amount of \$		to cover	the filing fee is enc	losed.
Paymen	t by credit card. F	om PTO-2038	is attached.		
und Annasidesc	ribed belowA.du	dicate copy of	ge and credit this sheet is	Deposit Account Nenclosed.	lo. <u>04-1105</u>
86.00 X Cre	dit any overpayme	nt. Van en analisatio		food manifod under '	37 CFR 1.16 and 1.17.
, –			in processing	iees required brider (	or Crit 1.10 and 1.11.
	× C. 4			Dated:	August 30, 2004
Christine C Attorney R					
	& ANGELL, LLP				
P.O. Box 5 Boston, Ma	5874 assachusetts 0220	)5			
(617) 439-					
I hereby certify to	hat this correspondence	is being deposited v	vith the U.S. Post	al Service as Express Ma	il, Airbill No. EV437821186L
in an envelope a shown below.	ddressed to: MS Amend	lment, Commission	er for Patents, P.0	D. Box 1450, Alexandria, \	VA 22313-1450, on the date
Dated: August 3	0. 2004	Signature:	hise	Chr (Chr	istine C. O'Day)

## PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

Effective October 1, 2003 CLAIMS AS FILED - PART I **SMALL ENTITY OTHER THAN** (Column 1) (Column 2) TYPE [ **SMALL ENTITY** OR **TOTAL CLAIMS** '3 RATE FEE RATE FEE FOR OR BASIC FEE NUMBER FILED NUMBER EXTRA **BASIC FEE** 385.00 770.00 TOTAL CHARGEABLE CLAIMS minus 20= X\$ 9= X\$18= OR INDEPENDENT CLAIMS minus 3 = X43= X86= OR MULTIPLE DEPENDENT CLAIM PRESENT 4 +145= +290= OR \* If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL OR TOTAL **CLAIMS AS AMENDED - PART II** OTHER THAN **SMALL ENTITY** OR **SMALL ENTITY** (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-ADDI-REMAINING NUMBER PRESENT ENT TIONAL RATE RATE TIONAL AFTFR **PREVIOUSLY EXTRA AMENDMENT PAID FOR** FEE FEE AMENDM Total Minus X\$ 9= X\$18= OR Independent Minus X43= X86= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +145≟ +290= OR TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-ADDI-8 REMAINING NUMBER PRESENT ENT TIONAL RATE RATE TIONAL **AFTER PREVIOUSLY EXTRA** AMENDMENT PAID FOR FEE FEE AMENDM Total Minus X\$ 9= X\$18= OR Independent Minus = \*\*\* X43 =X86= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +145= +290= OR TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) **CLAIMS** HIGHEST ပ ADDI-ADDI-REMAINING NUMBER **PRESENT** AMENDMENT TIONAL TIONAL AFTER **PREVIOUSLY EXTRA** RATE RATE **AMENDMENT** PAID FOR FEE FEE Total Minus \*\* X\$ 9= X\$18= OR independent Minus X43 =X86= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +145= +290= OR \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. TOTAL TOTAL OR ADDIT. FEE

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<sup>\*\*</sup> If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." \*\*\*If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

ADDIT. FEE The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.